

# EXHIBIT B

*In Re: Dicamba Herbicides Litigation*  
**Confidential Crop Damage Plaintiff Fact Sheet (Short-Form) – Subject to Protective Order**

THIS DOCUMENT RELATES TO

**Individual Civil Case No. (Not MDL No.):** \_\_\_\_\_

**CONFIDENTIAL PLAINTIFF FACT SHEET**

Please complete this form based on the instructions. If additional space is needed to supply the requested information, please attach additional pages to this form. Note that multiple names may be printed above in the “Plaintiff Name” line if claims are being brought by the partners of a partnership. Only one Plaintiff (whether an individual or entity) should be submitted on a Plaintiff Fact Sheet. Plaintiff should only provide information that Plaintiff knows and in Plaintiff’s possession, custody, and control. Plaintiff should not guess or make assumptions.

**Plaintiff’s Name:** \_\_\_\_\_

*(If claims are being asserted by partners of a partnership, only one form should be completed.)*

**Plaintiff’s Address:** Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Social Security or Tax ID #:** \_\_\_\_\_

*(This number depends on what type of entity is asserting a claim. If you farm in your individual capacity, provide your social security number. If you farm as an entity, provide your tax identification number.)*

If Plaintiff is a corporation, limited liability company (LLC), limited liability partnership (LLP), limited partnership (LP), or any other legal entity, please name the state under whose laws Plaintiff is organized. Plaintiff would have filed organizational documents with the Secretary of State or Division of Corporations in this state.

\_\_\_\_\_  
*\*\*\*If additional space is needed to supply the requested information, please attach additional pages to this form.*

**1. Provide the name of the individual completing this form and relation to Plaintiff.**

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

**2. Does Plaintiff use e-mail to conduct any farming business?**

Yes ☐ or No ☐

If yes, please provide the e-mail address(es): \_\_\_\_\_

**Does Plaintiff keep electronic records reflecting any of the information described on this form?**

Yes ☐ or No ☐

**3. Since 2011, has Plaintiff worked directly or indirectly (for example employed by or contracted to do work) for any of the following to sell or distribute any farm-input product (including seeds, fertilizer, pesticides or other crop protection products, or similar product):**

- ☐ Monsanto
- ☐ BASF (and related companies)
- ☐ DuPont
- ☐ Pioneer Hi-Bred

**4. Has Plaintiff ever been certified as a pesticide applicator (private or commercial)?**

Yes ☐ or No ☐ If Yes, dates of certification: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**5. Did Plaintiff file a lawsuit in either of these litigations?**

- ☐ *In Re: Syngenta MIR162 Corn Litigation*
- ☐ *In re: Genetically Modified Rice Litigation*

**6. If Plaintiff has previously been a party (Plaintiff or Defendant) to any lawsuit or claim relating to: the alleged off-target movement of any herbicide; crop seed; or crop chemistry, provide the following information:**

Case Caption or Claim	Case No.	Jurisdiction	Act as Class Representative?	Did Plaintiff Receive any Settlement?

**7. Has Plaintiff ever purchased Xtend soybeans?**

Yes ☐ or No ☐

If yes, identify years of purchase: ☐ 2016 ☐ 2017 ☐ 2018

Provide the following information for each year or produce documents sufficient to provide such information.

Year: \_\_\_\_\_ From whom purchased: \_\_\_\_\_

**8. Has Plaintiff ever purchased Xtend cotton seed?**

Yes ☐ or No ☐

If yes, identify years of purchase: ☐ 2015 ☐ 2016 ☐ 2017 ☐ 2018

Provide the following information for each year or produce documents sufficient to provide such information.

Year: \_\_\_\_\_ From whom purchased: \_\_\_\_\_

**9. Has Plaintiff ever purchased a dicamba herbicide (ex. XtendiMax, FeXapan, Engenia, Banvel, Clarity) and either (1) sprayed that herbicide over the top of any crop, or (2) otherwise applied the dicamba herbicide in May, June, or July?**

Yes ☐ or No ☐

If yes, identify which product:

Product	Year Purchased

**10. Did Plaintiff file a complaint with a state Department of Agriculture, or any other state or federal entity, relating to losses alleged in this lawsuit?**

Yes ☐ or No ☐

**11. For each allegedly damaged field, for which Plaintiff is asserting a claim, provide the following information:**

*\*\*For all following questions, if no FSA identifiers exist for the allegedly damaged fields, identify the location with sufficient detail (e.g., GPS point, road intersection, 911 address, plat section, township section, or range number, etc.).*

Field Name:	FSA Farm#:	Tract#:	Field#:
<b>Crop Allegedly Damaged:</b>		<b>Date Planted:</b>	
<b>Date Alleged Damage Observed:</b>		<b>Person Observing Alleged Damage:</b>	
<b>Description of Alleged Damage Observed</b>			
<b>Total Acres Allegedly Damaged:</b>			

12. To the extent known, provide the following information regarding the preparation and cultivation methods of each allegedly damaged field or produce documents sufficient to show this information:

Field Name:	FSA Farm#:	Tract#:	Field#:
Planting and Cultivation Methods			
Seed Brand		Seed Variety	
Seed Treatment			
Irrigation	Irrigation: Yes <input type="checkbox"/> or No <input type="checkbox"/>		
Insecticide Treatments			
Fungicide Treatments			
Treatments with herbicides	Active ingredient: _____ Trade name: _____ Tank mix additives: _____		

13. If Plaintiff or a third party tested for the presence of dicamba in the allegedly damaged crops, identify the testing entity and test results? (If not, write N/A)

\_\_\_\_\_

\_\_\_\_\_

14. Has Plaintiff's fields/crops been inspected by some person or entity other than Plaintiff or someone employed by Plaintiff to identify dicamba-related damage?

Yes ☐ or No ☐

15. To the extent known, provide the following information regarding each field Plaintiff alleges was damaged:

Field Name:	FSA Farm#:	Tract#:	Field#:
Location where herbicide was sprayed that harmed this particular field			
Herbicide brand that harmed this particular field		Herbicide manufacturer:	
Name of person who applied herbicide that harmed this particular field		Crop herbicide was applied to:	
Date(s) that herbicide was applied	_____, _____, _____		

16. To the extent known, for each field allegedly damaged and if available, provide (i) the information below for the year of alleged damage; and (ii) at least two years of information prior to that year for the same crop that was planted on that field. Alternatively, produce documents sufficient to provide this information. produce documents sufficient to provide this information. Yield loss includes loss from fire, hail, flood, drought, etc. (For example, if Plaintiff planted soybeans in 2015 and rotates crops yearly, data should be provided for 2013 and 2011.)

Field Name:		FSA Farm#:	Tract#:	Field#:
Year	Crop	Per acre yield	Yield loss (if any)	


17. To the extent known, for each field for which there is no claim of damage, provide the most recent two years of data for the crop you allege was damaged, or produce documents sufficient to show this information:

Field Name	FSA Farm #	FSA Tract #	FSA Field #	Total Acreage	Acres Planted	Acres Harvested	Crops Grown From 2011 to Present

18. Describe any demands/claims/correspondence submitted to third parties for alleged dicamba damage or produce documents sufficient to identify any demands/claims/correspondence. *(This does not include discussions with your attorney.)*

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19. If Plaintiff is claiming any damages other than yield loss, please itemize each item of other alleged damage:

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20. Identify any verbal or written communications Plaintiff has had with Defendants, or anyone known by Plaintiff to be a representative or employee of Defendants (including, but not limited to, crop consultants, investigators, salesmen, and distributors), relating to any issue in Plaintiff's Complaint or produce documents sufficient to show written communications with Defendants.

Name of Defendant Contact	Date	Type of Communication (electronic, verbal in-person, verbal on the telephone, written)	Location of Communication (if verbal)	Subject of Communication and Information Relayed	Are There Any Written Records or Recordings of the Communication? (e.g., notes or summaries)

21. Identify all persons, other than your attorney, who Plaintiff believes possess information concerning Plaintiff's alleged damage.

Name	Street Address	City	State	Relationship	Description of Information

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**DOCUMENTS REQUESTED: Produce the following documents that are in your possession, custody, or control.**

1. Plaintiff's FSA Producer Farm Data Report from 2014 to the present.
2. Plaintiff's FSA 578 Producer Print Report of Acreage from 2014 to the present plus those referenced in response to Questions 11, 12, 16 and 17.
3. Records sufficient to show Plaintiffs' yields and any alleged yield losses for the years referenced in Questions 11, 12, and 16.
4. Seed purchase receipts for allegedly damaged crop.
5. Seed purchase receipts for Xtend soybeans and/or Xtend cotton seed.
6. Records related to any complaint filed with Plaintiff's state Department of Agriculture, or any other state or federal entity, regarding the damage alleged in this lawsuit.
7. Communications with Defendants, or any person known to you to be a representative or employee of Defendants (including, but not limited to, crop consultants, investigators, salesmen, and distributors), relating to any issue in this lawsuit.
8. Records sufficient to show government disaster program payments for the fields Plaintiff alleges were damaged.

**VERIFICATION OF PLAINTIFF'S FACT SHEET**

I, \_\_\_\_\_, declare under penalty of perjury subject to all applicable laws, that I have carefully reviewed the final copy of this Confidential Plaintiff Fact Sheet dated \_\_\_\_\_ and verified that all of the information provided is true and correct to the best of my knowledge, information and belief.

\_\_\_\_\_  
**Signature of Plaintiff**